# Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 1 of 68

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
your governmen picture identifica	Write the name that is on your government-issued picture identification (for example, your driver's	Sheryl First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture dentification to your meeting with the trustee.	Walker Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7978	

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 2 of 68

Debtor 1 Sheryl Walker

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs		
5.	Where you live	8111 S Marquette Ave	If Debtor 2 lives at a different address:		
		Chicago, IL 60617  Number, Street, City, State & ZIP Code  Cook	Number, Street, City, State & ZIP Code		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 3 of 68

Case number (if known) Debtor 1 Sheryl Walker

ar	Tell the Court About	Your E	3ankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.   Chapter 7							
	choosing to file under								
			Chapter 11						
			Chapter 12						
			Chapter 13						
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is sub	oically, if you are	e paying the	fee yourself, you n	nay pay with cash, ca	al court for more details shier's check, or money credit card or check with
					tallments. If yo		s option, sign and	attach the Application	n for Individuals to Pay
☐ I request that my fee but is not required to,					your fee, and maded in the second in the sec	nay do so onl ole to pay the	y if your income is fee in installment	less than 150% of the s). If you choose this	7. By law, a judge may, e official poverty line that option, you must fill out ir petition.
).	Have you filed for bankruptcy within the	■ N	o.						
	last 8 years?	☐ Y	es.						
			District						
			District			When		_ Case number	
			District			When		Case number	
10.	Are any bankruptcy	■ N	0						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y	es.						
			Debtor					Relationship to you	
			District			When		Case number, if kno	wn
			Debtor					Relationship to you	
			District			When		Case number, if kno	wn
11.	Do you rent your	□ N	o. Go to li	ine 12.					
	residence?	■ Y	es. Has yo	ur landlord obta	ained an evictio	n judgment a	against you and do	you want to stay in y	our residence?
			<b>.</b>	No. Go to line	12.				
			_		itial Statement	About an Evi	iction Judgment Ag	gainst You (Form 101	A) and file it with this

Document Page 4 of 68 Case number (if known) Sheryl Walker Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Document **Sheryl Walker** Debtor 1

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 6 of 68

Case number (if known) Sheryl Walker **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. □ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sheryl Walker Sheryl Walker Signature of Debtor 2 Signature of Debtor 1 Executed on December 30, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1

Debtor 1 Sheryl Walker Page 7 of 68 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Julie Gleason	Date	December 30, 2016
Signature of Attorney for Debtor	_	MM / DD / YYYY
Iulia Olasaan		
Julie Gleason		
Printed name		
Gleason & Gleason		
Firm name		
77 W Washington, Ste 1218		
Chicago, IL 60602		
Number, Street, City, State & ZIP Code		
Contact phone (312) 578-9530	Email address	troy@chicagobk.com
6273536		
Bar number & State		<del></del>

Document Page 8 of 68 Fill in this information to identify your case: Debtor 1 **Sheryl Walker** Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	20,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	44,232.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	64,232.00
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	10,369.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	36,125.81
	Your total liabilities	\$	46,494.81
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,230.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,200.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Debtor 1 Sheryl Walker Document Page 9 of 68 Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	Cá	ase 16-40835		_	12/30/16 ument	Entered 12/30/1 Page 10 of 68	.6 15:51:49	Des	c Main	
Fill	in this infor	mation to identify you				Faue 10 01 00				
Deb	otor 1	Sheryl Walker								
		First Name	Middle Na	ame		Last Name				
	otor 2 use, if filing)	First Name	Middle Na	ame		Last Name				
Unit	ted States Ba	ankruptcy Court for the:	NORTHERN	DISTI	RICT OF ILLI	NOIS				
								_	_	
Cas	se number _					_			Check if this is amended filing	an
									amonada ming	
∩f	ficial Fo	rm 106A/B								
			oortv							
		e A/B: Pro							12/15	
						an asset fits in more than one e are filing together, both are				u
nfor	mation. If mor	e space is needed, attac				e top of any additional pages				
Ansv	ver every ques	stion.								
Part	1: Describe	Each Residence, Buildin	ıg, Land, or Othe	r Real	Estate You Ov	vn or Have an Interest In				
D	o vou own or	have any legal or equitab	le interest in any	, resid	ence huilding	, land, or similar property?				
	_		ne interest in any	reside	ence, bunding	, land, or similar property:				
_	No. Go to Pa									
	Yes. Where i	is the property?								
1.1	0040 C B.	uun la anna		What	is the property	y? Check all that apply				
	8010 S Bu	Jrnnam , if available, or other descriptio	<u> </u>		Single-family				ns or exemptions. Put claims on <i>Schedule D</i> .	
	,					lti-unit building or cooperative			Secured by Property.	
					Condominium	Tor cooperative				
					Manufactured	l or mobile home	Current value of	the	Current value of the	
	Chicago		617-0000		Land		entire property?	0.00	portion you own?	2
	City	State	ZIP Code		Investment pr Timeshare	operty	\$20,00	0.00	\$20,000.	<i>J</i> U
					Other				ur ownership interest	
				Who	has an interes	t in the property? Check one	a life estate), if k		,,	
					Debtor 1 only					
	Cook				Debtor 2 only					
	County				Debtor 1 and				unity property	
						of the debtors and another you wish to add about this ited	(see instruction	S)		
					erty identificati		, caon ao 100a.			
				Abar	ndoned					
						from Part 1, including any			\$20,000.00	
		Your Vehicles								_
rall	2: Describe	TOUT VEHICLES								
						whether they are registere		any veh	icles you own that	
ome	eone else dri	ves. It you lease a vehi	cie, also report i	t on S	cnedule G: E	xecutory Contracts and Une	expired Leases.			
3. <b>C</b>	ars, vans, tr	ucks, tractors, sport ι	ıtility vehicles,	moto	rcycles					
	_									

■ No

☐ Yes

Dobtor 1	Chamil Malkar	Document	Page 11 of 68 Case number	(if Impum)
Debtor 1	Sheryl Walker		Case number	(II KNOWI)
			nicles, other vehicles, and accessor snowmobiles, motorcycle accessories	ies
■ No				
☐ Yes				
			from Part 2, including any entries fo	
Bort 2: Do	escribe Your Personal and Househ	old Itama		
	wn or have any legal or equital		wing items?	Current value of the
Ĭ		,		portion you own? Do not deduct secured claims or exemptions.
	nold goods and furnishings les: Major appliances, furniture, I	nens, china, kitchenware		
■ Yes.	Describe			
	\		1211	1
	Misc. Hous tables, cha		urniture, Kitchen Appliances,	\$1,200.00
	tubico, ona			
□ No			uipment; computers, printers, scanners	s; music collections; electronic devices
		Electronics (Including Tel ones, Stereos)	levisions, Radios, Computers,	\$350.00
Examp	ibles of value  les: Antiques and figurines; paint other collections, memorabil  Describe		ooks, pictures, or other art objects; sta	amp, coin, or baseball card collections;
	nent for sports and hobbies les: Sports, photographic, exercis	se, and other hobby equipment	t; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
■ No	musical instruments  Describe			
10. Firear		munition, and related equipme	at the same of the	
■ No	Describe	munition, and related equipme	911	
11. Clothe Exam ☐ No	es ples: Everyday clothes, furs, leat	ner coats, designer wear, shoe	es, accessories	
Yes.	Describe			
	Used Cloth	ing		\$200.00
10 laurel	r.,			
12. <b>Jewel</b> Exam		jewelry, engagement rings, we	edding rings, heirloom jewelry, watches	s, gems, gold, silver
□ No				
Yes.	Describe			

Official Form 106A/B

Debtor 1	Sheryl Walk	er	1	Document Page 12	2 of 68 Case number (if known)	
		Misc.	Costume Jewelr	у		\$100.00
Exam ■ No	arm animals nples: Dogs, cats, . Describe	birds, ho	rses			
■ No	ther personal an			not already list, including any	y health aids you did not list	
				Part 3, including any entries fo		\$1,850.00
Part 4: Do	escribe Your Finan	cial Asset	s			
				n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No			our wallet, in your h		on hand when you file your petition  Cash on Hand	\$0.00
Exam				ounts; certificates of deposit; shass with the same institution, list ear	ares in credit unions, brokerage ho ach.	uses, and other similar
_ 103		17.1.	Checking	US Bank		\$94.00
						-
		17.2.	Savings	US Bank		\$20.00
Exam ■ No	nples: Bond funds			okerage firms, money market ac	ccounts	
		ock and	Institution or issuer		usinesses, including an interest	in an LLC nartnership and
	venture	oon allu	micresis ili ilicorp	oraceu anu unincorporateu bi	annesses, moluting an intelest	iii aii EEO, partiici siiip, diiu
	. Give specific inf		about them me of entity:		% of ownership:	

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☐ Yes. Give specific information about them

Issuer name:

D	ebtor 1	Sheryl Wal	ker	Document	Page 13 of 68	Case number (if known)	
		ment or pension ples: Interests in		gh, 401(k), 403(b), thrift savi	ngs accounts, or other pe	ension or profit-sharing plans	
	■ Yes.	List each accou	unt separately. Type of accou	nt: Institutio	n name:		
				401(k) v	v/ Current Employer	- 100% exempt	\$268.00
22.	Your s	hare of all unus		ive made so that you may c repaid rent, public utilities (e		m a company ommunications companies, or c	others
	■ No □ Yes.			Institution	n name or individual:		
23.	. Annuit	ies (A contract	for a periodic paym	ent of money to you, either	for life or for a number of	years)	
	☐ Yes		ssuer name and de	escription.			
24.	26 U.S.		ion IRA, in an acc , 529A(b), and 529(		orogram, or under a qua	lified state tuition program.	
	■ No □ Yes		nstitution name and	d description. Separately file	e the records of any intere	ests.11 U.S.C. § 521(c):	
25.	■ No	•	uture interests in	, ,	ning listed in line 1), and	rights or powers exercisabl	e for your benefit
26.	Examp ■ No	oles: Internet do		secrets, and other inteller ites, proceeds from royalties em		its	
27.	Licens	es, franchises	, and other genera		tion holdings, liquor licens	ses, professional licenses	
	■ No □ Yes.	Give specific in	nformation about th	em			
M	oney or	property owed	I to you?			<b>pc</b> Do	urrent value of the ortion you own? o not deduct secured aims or exemptions.
28.	☐ No	funds owed to		em, including whether you a	Iready filed the returns an	d the tax years	
				Estimated 2016 Federa	al Income Tax		\$0.00
29	Examp	support ples: Past due c		y, spousal support, child su	oport, maintenance, divor	ce settlement, property settlem	ent
				Child Summer		7	
				Child Support			\$42,000.00

Official Form 106A/B Schedule A/B: Property page 4

Document Page 14 of 68 Case number (if known) Debtor 1 Sheryl Walker 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Term Life Insurance Policy w/ \$0.00 **Employer - No CSV** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$42.382.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00

Schedule A/B: Property

Case 16-40835

Doc 1

Filed 12/30/16

Entered 12/30/16 15:51:49

Desc Main

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Page 15 of 68

Case number (if known)

Document Debtor 1 **Sheryl Walker** 

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$20,000.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$1,850.00		
58.	Part 4: Total financial assets, line 36	\$42,382.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$44,232.00	Copy personal property total	\$44,232.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$64,232.00

Official Form 106A/B Schedule A/B: Property page 6

		DOM:	THE TRUCK TO OF OU	
Fill in this infor	mation to identify your	case:		
Debtor 1	Sheryl Walker			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	lue from Check only one box for each exemption.		Specific laws that allow exemption
Misc. Household Goods (Bedroom Furniture, Kitchen Appliances, tables, chairs, sofas) Line from <i>Schedule A/B</i> : 6.1	\$1,200.00		\$1,200.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Used Clothing Line from Schedule A/B: 11.1	\$200.00		100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Misc. Costume Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Cash on Hand Line from Schedule A/B: 16.1	\$0.00		\$0.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Checking: US Bank Line from Schedule A/B: 17.1	\$94.00		\$94.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 17 of 68
Case number (if known)

Shici i Silei yi walkei			Case number (ii known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Savings: US Bank Line from Schedule A/B: 17.2	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
401(k) w/ Current Employer - 100% exempt	\$268.00		100%	735 ILCS 5/12-1006
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
Estimated 2016 Federal Income Tax Refund	\$0.00		\$0.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
Estimated 2016 Federal Income Tax Refund	\$0.00		\$0.00	735 ILCS 5/12-1001(g)(1)
Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every  ■ No □ Yes. Did you acquire the property cover □ No	3 years after that for ca	ases fi	•	,
☐ Yes				

	Document Pa	age 18 of 68		
Fill in this information to identify	your case:			
Debtor 1 Sheryl Walk	ar .			
First Name		st Name	_	
Debtor 2				
(Spouse if, filing) First Name	Middle Name Las	st Name	_	
United States Bankruptcy Court for	the: NORTHERN DISTRICT OF ILLINO	IS		
Office States Barikruptcy Court for	TOTALIST OF IEEETO		_	
Case number				
(if known)			☐ Check	if this is an
			amend	ded filing
000 : 15 4005				
Official Form 106D				
Schedule D: Credito	ors Who Have Claims Se	cured by Proper	ty	12/15
	ble. If two married people are filing together, be Ill it out, number the entries, and attach it to the			
number (if known).	in it out, number the officies, and attach it to the	io formi on the top of any addit	ionai pagoo, wiito your na	mo ana sass
1. Do any creditors have claims secure	ed by your property?			
☐ No. Check this box and subr	mit this form to the court with your other sch	edules. You have nothing else	e to report on this form.	
Yes. Fill in all of the informat	•			
Part 1: List All Secured Claims	5	. Column A	Column B	Column C
	has more than one secured claim, list the creditor	separately		
	r has a particular claim, list the other creditors in Pabetical order according to the creditor's name.	art 2. As Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	abolical order according to the creater of hame.	value of collateral.	claim	If any
2.1 City of Chicago - Utility		\$2.360.00	00 000 00	\$0.00
Billing	Describe the property that secures the c		\$20,000.00	\$0.00
Creditor's Name	8010 S Burnham Chicago, IL 60	617		
	Cook County			
	Abandoned  As of the date you file, the claim is: Check	c all that		
PO Box 6330	apply.	van triat		
Chicago, IL 60680	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
N	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortg	gage or secured		
Debtor 2 only	cai idaii)			
☐ Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechani	c's lien)		
lacksquare At least one of the debtors and anoth	ner			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number	8408		
2.2 Cook County Treasurer	Describe the property that secures the c	laim: \$8,000.00	\$20,000.00	\$0.00
Creditor's Name	8010 S Burnham Chicago, IL 60		φ20,000.00	Ψ0.00
oroanor o riamo	Cook County	017		
440 N. Olavia Ot	Abandoned			
118 N. Clark. St. Suite 112	As of the date you file, the claim is: Check	c all that		
Chicago, IL 60602	apply.			
	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
_	☐ An agreement you made (such as morto	rane or secured		
Debtor 1 only	car loan)	gage or secured		
Debtor 2 only	_			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechani	c's lien)		
At least one of the debtors and anoth	9			
☐ Check if this claim relates to a	Other (including a right to offset)			

community debt

# Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 19 of 68

Debtor	1 Sheryl Walker			Case	number (if know)	
	First Name	Middle Name	Last Name			
Date de	bt was incurred	La	st 4 digits of account number			
Add t	he dollar value of your	entries in Column A or	n this page. Write that number he	ere:	\$10,369.00	
	is the last page of you that number here:	r form, add the dollar v	value totals from all pages.		\$10,369.00	
Part 2:	List Others to Be	Notified for a Debt T	hat You Already Listed			
trying to	o collect from you for a	a debt you owe to some e debts that you listed	about your bankruptcy for a debt eone else, list the creditor in Part in Part 1, list the additional cred	t 1, and then lis	st the collection agency her	e. Similarly, if you have more
	Name, Number, Street, ( Arnold Scott Harri			On which line	in Part 1 did you enter the cr	editor? _ <b>2.1</b> _
1	I11 W. Jackson S Chicago, IL 60604	te 400		Last 4 digits of	of account number	
	Name, Number, Street, C	City, State & Zip Code		On which line	in Part 1 did you enter the cr	editor? _ <b>2.1</b> _
1	Attn: Mayor Rahm I21 N LaSalle, #50 Chicago, IL 60602	7		Last 4 digits of	of account number	
1	Name, Number, Street, C City of Chicago Do Attn: Charles King I 21 North LaSalle Chicago, IL 60602	ept of Law J Street, Suite 600			in Part 1 did you enter the cr	editor? <b>2.1</b>

	Cas	E 10-40055 L	Docume		15.51.45	oc iviali i
Fill in	this informa	ation to identify your				
Debtor	r 1	Sheryl Walker				
20210.		First Name	Middle Name	Last Name		
Debto						
(Spouse	if, filing)	First Name	Middle Name	Last Name		
United	States Bank	cruptcy Court for the:	NORTHERN DISTRICT	F OF ILLINOIS		
Case r	number					
(if knowr						heck if this is an
					a	mended filing
Offici	ial Form	106E/E				
			/ho Have Unsec	ured Claims		12/15
				PRIORITY claims and Part 2 for creditors	with NONDRIGHTY elei	
Schedu left. Atta name ai	le D: Creditor ach the Contii nd case numb	s Who Have Claims Sec nuation Page to this pag per (if known).	ured by Property. If more s ge. If you have no information	106G). Do not include any creditors with pace is needed, copy the Part you need, on to report in a Part, do not file that Par	, fill it out, number the en	tries in the boxes on the
Part 1		of Your PRIORITY Un				
_	-	s have priority unsecure	d claims against you?			
	No. Go to Par	t 2.				
	Yes.	of Vous MONDDIODIT	V Unacquired Claims			
Part 2		of Your NONPRIORIT				
_	-		cured claims against you?			
Ц	No. You have	nothing to report in this p	art. Submit this form to the co	ourt with your other schedules.		
	Yes.					
uns tha	secured claim,	list the creditor separately	y for each claim. For each cla	der of the creditor who holds each claim aim listed, identify what type of claim it is. D 3.If you have more than three nonpriority un	o not list claims already inc	luded in Part 1. If more
						Total claim
4.1		Medical Group	Last 4 digit	s of account number	_	\$114.00
	Nonpriority (	Creditor's Name	When was t	the debt incurred?		
	Chicago,		Wileli was i	e debt incurred:		-
		eet City State Zlp Code	As of the da	ate you file, the claim is: Check all that ap	oply	
	Who incurre	ed the debt? Check one.				
	Debtor 1	only	☐ Continge	ent		
	Debtor 2	only	☐ Unliquida	ated		
	Debtor 1	and Debtor 2 only	☐ Disputed			
	☐ At least of	one of the debtors and and	ouiei .	NPRIORITY unsecured claim:		
		this claim is for a com				
	debt Is the claim	subject to offset?	☐ Obligation report as pri	ons arising out of a separation agreement of iority claims	or divorce that you did not	
	■ No	-	<u></u>	pension or profit-sharing plans, and other	similar debts	
	☐ Yes		Other. S	pecify		

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 21 of 68 Case number (if know)

Advocate Trinity Hospital	Last 4 digits of account number	\$234.0
Nonpriority Creditor's Name PO Box 4253	When was the debt incurred?	
Carol Stream, IL 60197		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Afni	Last 4 digits of account number	\$0.0
lonpriority Creditor's Name 310 Martin Luther King Dr.	When was the debt incurred?	
Bloomington, IL 61702  Jumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another  ☐ Check if this claim is for a community	☐ Student loans	
ebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify	
Big Picture Loans	Last 4 digits of account number	\$600.00
Nonpriority Creditor's Name PO Box 704	When was the debt incurred?	
Natersmeet, MI 49969 Number Street City State ZIp Code	As of the date you file the claim is: Check all that capty	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
	■ Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community lebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	■ Other. Specify Payday Loan	

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 22 of 68
Case number (if know)

Debio	Sileryi waikei		Case Humber (II know)			
4.5	Brookwood Loans of IL	Last 4 digits of account number		\$1,100.00		
	Nonpriority Creditor's Name PO Box 5970	When was the debt incurred?				
	Alpharetta, GA 30023  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
4.6	Capital One Bank Usa N	Last 4 digits of account number	7008	\$1,613.00		
	Nonpriority Creditor's Name		Opened 11/14 Last Active			
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	11/16/16			
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	■ Other. Specify Credit Card	I			
4.7	Capital One Bank Usa N  Nonpriority Creditor's Name	Last 4 digits of account number	5896	\$1,585.00		
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 11/14 Last Active 11/15/16			
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	•	,			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts				
	■ No					
	☐ Yes	Other Specify Credit Card	1			

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 23 of 68

Debtor 1 Sheryl Walker Case number (if know) 4.8 \$1,080.00 Capital One Bank Usa N Last 4 digits of account number 3404 Nonpriority Creditor's Name Opened 03/16 Last Active 15000 Capital One Dr When was the debt incurred? 11/16/16 Richmond, VA 23238 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.9 Capital One Bank Usa N Last 4 digits of account number 6607 \$557.00 Nonpriority Creditor's Name Opened 09/15 Last Active 15000 Capital One Dr When was the debt incurred? 11/14/16 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 1539 \$111.00 Cci Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Contract Callers Inc. Cci Augusta, GA 30901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 10 Commonwealth Edison Company ☐ Yes

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 24 of 68

Sneryi waiker		Case number (if know)	
Citifinancial	Last 4 digits of account number	1095	Unknown
Nonpriority Creditor's Name	When was the debt incurred?	Opened 07/05 Last Active 1/25/07	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Real Estate	Mortgage	
Comenity Bank/vctrssec Nonpriority Creditor's Name	Last 4 digits of account number	7492	\$183.00
Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 04/16 Last Active 10/14/16	
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	■ Other. Specify Charge Acc		
Convergent Outsourcing, Inc.	Last 4 digits of account number		\$793.81
Nonpriority Creditor's Name			ψ. 55.51
800 SW 39th St.	When was the debt incurred?		
PO Box 9004 Renton, WA 98057			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing	a plane, and other similar debts	
■ No	•		
□ Yes	Other. Specify Collections		

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 25 of 68

Case number (if know) Debtor 1 Sheryl Walker 4.1 \$8,000.00 **Cook County Treasurer** Last 4 digits of account number 4 Nonpriority Creditor's Name 118 N. Clark. St. When was the debt incurred? Suite 112 Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Credit Management Lp 5849 \$334.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 4200 International Pkwy When was the debt incurred? **Opened 01/12** Carrollton, TX 75007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Wow Internet Cable** ☐ Yes ■ Other. Specify Phone - 1 Credit One Bank Na 7418 \$451.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/15 Last Active Po Box 98872 When was the debt incurred? 11/30/16 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

Official Form 106 E/F

Debtor 1 Sheryl Walker	Document Page 2	26 of 68 Case number (if know)	an i
.1 Creditors Discount & Audit Co.	Last 4 digits of account number		\$39.00
Nonpriority Creditor's Name 415 E Main St Streator, IL 61364	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepreport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-shari	ng plans, and other similar debts	
Yes	Other. Specify Collections	s	
.1 DashOfCash	Lost A digite of account number		\$600.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ000.00
PO box 1469	When was the debt incurred?		
Khanawake QB			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	По		
•	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed	ad alaim.	
At least one of the debtors and another	Type of NONPRIORITY unsecure  ☐ Student loans	ed Claim:	
☐ Check if this claim is for a community debt	_		
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing		
Yes	Other. Specify		
1 Enhanced Recovery Co L	Last 4 digits of account number	0717	\$198.00
Nonpriority Creditor's Name			
8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred?	Opened 12/13	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sep		

■ No ☐ Yes report as priority claims

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Collection Attorney At T

Is the claim subject to offset?

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 27 of 68

Debt	or 1 Sheryl Walker		Case number (if know)			
4.2 0	Eos Cca	Last 4 digits of account number	1337	\$1,089.00		
	Nonpriority Creditor's Name Po Box 981008 Boston, MA 02298	When was the debt incurred?	Opened 08/12			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes					
4.2	First National Collection Bureau	Last 4 digits of account number		\$0.00		
1	Nonpriority Creditor's Name			Ψ0.00		
	610 Waltham Way	When was the debt incurred?				
	Sparks, NV 89434  Number Street City State Zlp Code		to OL I III I			
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Cneck all that apply			
	■ Debtor 1 only	Пол				
		☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:			
	At least one of the debtors and another	Student loans	d Claiiii.			
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify Collections				
4.2	First Premier Bank	Last 4 digits of account number	5992	\$462.00		
2	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ+02.00		
	601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 11/13 Last Active 5/25/14			
	Number Street City State ZIp Code	As of the date you file, the claim i	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□ Yes	Other Specify Credit Card	1			

Official Form 106 E/F

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 28 of 68

Debtor 1 Sheryl Walker Case number (if know) 4.2 Genesis Bc/celtic Bank \$295.00 8956 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 11/16 Last Active 268 S State St Ste 300 When was the debt incurred? 11/30/16 Salt Lake City, UT 84111 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 **Green Pine** \$500.00 Last 4 digits of account number Nonpriority Creditor's Name sokaogon Finance When was the debt incurred? 3051 Sand Lake Rd Crandon, WI 54520 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Unknown Illinois Department of Revenue Last 4 digits of account number 5 Nonpriority Creditor's Name **Bankruptcy Section** When was the debt incurred? PO Box 64338 Chicago, IL 60664-0338 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Only  $\prod_{V \in S}$ 

Entered 12/30/16 15:51:49 Case 16-40835 Doc 1 Filed 12/30/16 Desc Main

Document Page 29 of 68 Case number (if know) Debtor 1 Sheryl Walker 4.2 Illinois Dept of Employment Securit **Notic Only** Unknown Last 4 digits of account number 6 Nonpriority Creditor's Name **Bankruptcy Unit Collection** When was the debt incurred? Subdivis 33 S State St 10th Floor Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Notice Only 4.2 **Illinois Lending Bankruptcy Dept** \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name 724 W Washington When was the debt incurred? Chicago, IL 60661 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Payday Loan ☐ Yes 4.2 Internal Revenue Service \$153.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 7346 When was the debt incurred? 2015 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

Official Form 106 E/F

debt

■ No ☐ Yes report as priority claims

Other. Specify

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Entered 12/30/16 15:51:49 Case 16-40835 Doc 1 Filed 12/30/16 Desc Main

Page 30 of 68 Document Case number (if know) Debtor 1 Sheryl Walker 4.2 \$500.00 **North Star Finance LLC** Last 4 digits of account number 9 Nonpriority Creditor's Name PO Box 498 When was the debt incurred? Hays, MT 59527 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset?  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Tribal Loan ☐ Yes 4.3 **Northwestern Medical Group** \$52.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 26609 Network Place When was the debt incurred? Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.3 **Northwestern Medicine** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 28155 Network PI When was the debt incurred? Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\hfill \square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No ☐ Yes

Is the claim subject to offset?

report as priority claims

Other. Specify

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 31 of 68

Case number (if know) Debtor 1 Sheryl Walker 4.3 **Northwestern Memorial Hospital** \$65.00 Last 4 digits of account number 2 Nonpriority Creditor's Name 201 E Huron St #105 When was the debt incurred? Chicago, IL 60611 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 Onemain 3271 Last 4 digits of account number \$12,216.00 Nonpriority Creditor's Name Opened 07/16 Last Active Po Box 1010 When was the debt incurred? 11/30/16 Evansville, IN 47706 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Secured ☐ Yes 4.3 Springleaf Financial S 3271 Unknown Last 4 digits of account number Nonpriority Creditor's Name Opened 04/16 Last Active 3641 E 106th St When was the debt incurred? 6/15/16 Chicago, IL 60617 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Secured

Entered 12/30/16 15:51:49 Case 16-40835 Doc 1 Filed 12/30/16 Desc Main Document Page 32 of 68

Debtor 1 Sheryl Walker Case number (if know) 4.3 \$520.00 Syncb/amazon 9146 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 09/16 Last Active Po Box 965015 When was the debt incurred? 11/04/16 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.3 Syncb/walmart 0363 \$276.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 08/16 Last Active Po Box 965024 When was the debt incurred? 11/16/16 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.3 TCF National Bank \$270.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? 800 Burr Ridge Willowbrook, IL 60527 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community lacksquare Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Consumer Debt/ Ovrdraft

☐ Yes

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 33 of 68
Case number (if know)

1 Sheryl Walker	—————	Case number (if know)			
Trinity Hospital			\$500.00		
-	Last 4 digits of account number		\$300.00		
2320 East 93rd Street	When was the debt incurred?				
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	d claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
Yes					
· · · · · · · · · · · · · · · · · · ·	Last 4 digits of account number	<u>8581</u>	Unknown		
Nonpriority Creditor's Name		Opened 08/10 Last Active			
Po Box 7860 Madison, WI 53707	When was the debt incurred?	1/30/12			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	d claim:				
☐ Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	Debts to pension or profit-sharing				
Yes	Other, Specify				
Walter was Wain barry 0 Daile			<b>\$</b> 005.00		
	Last 4 digits of account number		\$635.00		
180 N LaSalle St, Ste 2400	When was the debt incurred?				
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only					
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community debt	☐ Student loans	aration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims	adon agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
□Yes	Other. Specify				
	Chicago, IL 60617  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Us Dept Of Ed/glelsi Nonpriority Creditor's Name Po Box 7860 Madison, WI 53707  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Weltman Weinberg & Reis Nonpriority Creditor's Name 180 N LaSalle St, Ste 2400 Chicago, IL 60601  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Chicago, IL 60601  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset?  No	Trinity Hospital Nonpriority Creditor's Name 2320 East 93rd Street Chicago, IL 60617 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only List eclaim subject to offset?  Nonpriority Creditor's Name Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 3 only Debtor 4 debtor 3 only Debtor 5 debtor 5 only Debtor 6 debtor 8 one. Debtor 7 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 debtor 8 one. Debtor 1 only Debtor 6 debtor 8 one. Debtor 1 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 o	Trinity Hospital Nonpriority Creditor's Name 2320 East 327d Street Chicago, IL 60617 Number Street (Dis Stille 2) pCode Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only Debtor 8 and Debtor 2 only Debtor 1 sharing plans, and other similar debts  US Dept Of Ed/glelsi Nonpriority Creditor's Name Po Box 7860 Name Street (Dis Stille 2) pCode Who incurred the debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 onlebtor 2 only Debtor 5 onless 8 et alims subject to offset? Nonpriority Creditor's Name No Debtor 1 onless 8 et alims 4 et alims 5 et alims 4 et alims 4 et alims 4 et alims 5 et alims 4		

### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 34 of 68

Debtor 1 Sheryl Walker		Case number (if know)			
ChexSystems 7805 Hudson Rd, Ste 100	Line <u>4.37</u> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims			
Saint Paul, MN 55125		■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?			
DirecTV	Line 4.21 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
Payment Center PO Box 78626		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Phoenix, AZ 85062	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2				
Emergency Room Care	Line 4.17 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
PO Box 87618 Chicago, IL 60680		Part 2: Creditors with Nonpriority Unsecured Claims			
Cincago, in oboot	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?			
Galaxy	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
1000 N West St, Ste 1224 Wilmington, DE 19801		Part 2: Creditors with Nonpriority Unsecured Claims			
Willington, 52 13001	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
LNVN Funding	Line 4.40 of (Check one):	Part 1: Creditors with Priority Unsecured Claims			
Resurgence Capital Services PO Box 10587 Hickory, NC 28603		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Thereby, NC 20003	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?			
MiraMed Revenue Group LLC	Line 4.32 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
Dept 77304 PO Box 77000		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Detroit, MI 48277-0304					
	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2				
Portfolio Recovery 130 Corporate Boulevard	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims			
Norfolk, VA 23502		■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address	did you list the original creditor?				
State Collection Service 2509 S Stoughton Rd	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Claims			
Madison, WI 53716		■ Part 2: Creditors with Nonpriority Unsecured Claims			
•	Last 4 digits of account number				
Part 4: Add the Amounts for Each Typ	e of Unsecured Claim				

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim	
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	ns	Obligations arising out of a separation agreement or divorce that	6g.	\$	

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 35 of 68

Debtor 1	Sheryl Wa	alker	raye	Case n	umber (if know)		
		you did not report as priority claims				0.00	
	6h.	Debts to pension or profit-sharing plans, and other simil	imilar debts	6h.	\$	0.00	
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that here.	amount	6i.	\$	36,125.81	
							1

36,125.81

Total Nonpriority. Add lines 6f through 6i.

Fill in this information to identify your case:						
Debtor 1	Sheryl Walker					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3	-			'	
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	•				

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main

		Docume	ent Page 37 d	of 68	
Fill in this	information to identify your	case:			
Debtor 1	Sheryl Walker				
DCDIOI 1	First Name	Middle Name	Last Name	<del></del>	
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	har				
(if known)	Dei			П	Check if this is an
					amended filing
				,	
Official	l Form 106H				
Sched	lule H: Your Cod	ehtors			12/15
Jenea	idle II. Tour Cod	CDIOIS			12/13
■ No □ Yes		ı lived in a community pr	operty state or territor	r <b>y?</b> (Community property states ar	nd territories include
■ No	Go to line 3.				
_	s. Did your spouse, former spo	use or legal equivalent live	with you at the time?		
<b>□</b> 163	s. Dia your spouse, former spo	use, or legal equivalent live	e with you at the time:		
in line Form out Co	2 again as a codebtor only	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make	r if your spouse is filing with you sure you have listed the credito 06G). Use Schedule D, Schedule  Column 2: The creditor to we Check all schedules that app	r on Schedule D (Official E/F, or Schedule G to fill /hom you owe the debt
3.1	Name			Schedule D, line	
'	reame			☐ Schedule E/F, line	
				☐ Schedule G, line	
_	Number Street			<del>_</del>	
1	City	State	ZIP Code		
				Пол. 11 В г	
3.2	Name			Schedule D, line	
'				☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

# Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 38 of 68

Fill	in this information to identify your	case:							
Del	otor 1 Sheryl Wall	ker			_				
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF ILLINOIS		_				
	se number nown)		-				nt showing	postpetition	chapter
O	fficial Form 106l				_			lowing date:	
	chedule I: Your Inc	come			ľ	MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you che a separate sheet to this form.  The describe Employment	u are married and not fili ur spouse is not filing w . On the top of any additi	ng jointly, and your spo ith you, do not include	ouse i	s living with nation abou	n you, inclu It your spo	ide inform use. If moi	ation about re space is r	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ng spouse	
	If you have more than one job, attach a separate page with information about additional		■ Employed			☐ Emplo	yed		
		Employment status	☐ Not employed			☐ Not er	mployed		
	employers.	Occupation	Administrative Co	ordin	ator				
	Include part-time, seasonal, or self-employed work.	Employer's name	American Society Specialists	of Re	etina				
	Occupation may include student or homemaker, if it applies.	Employer's address							
Par	t 2: Give Details About Mo	How long employed t	here? <u>3 Years</u>			_			
<b>Esti</b> spou	mate monthly income as of the cuse unless you are separated.  u or your non-filing spouse have me space, attach a separate sheet to	date you file this form. If			•		•	•	J
					For De	ebtor 1	For Debi	tor 2 or g spouse	
2.	List monthly gross wages, saldeductions). If not paid monthly,			2.	\$3	3,750.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$3,7	50.00	\$	N/A	

# Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 39 of 68

Debt	or 1	Sheryl Walker		C	Case	number ( <i>if k</i>	nown)				
					For	Debtor 1			Debtor n-filing s		
	Cop	y line 4 here	4.	-	\$	3,750	0.00	\$	illing 5	N/A	 \
_	·	*				-, -		_			_
5.		all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$_		0.00	\$_		N/A	_
	5b.	Mandatory contributions for retirement plans	5b		\$_		0.00	\$_		N/A	_
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c 5d		\$		0.00	\$_ \$		N/A N/A	_
	5e.	Insurance	5e		<b>\$</b> —		0.00	\$_		N/A	_
	5f.	Domestic support obligations	5f.		<b>\$</b> —		0.00	\$_		N/A	_
	5g.	Union dues	5g		\$		0.00	\$_		N/A	_
	5h.	Other deductions. Specify:	_		\$			+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	520	0.00	\$		N/A	<u> </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,230	0.00	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•			•			
	٥L	monthly net income.	8a		\$		0.00	\$_		N/A	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive	8b	).	\$		0.00	\$_		N/A	<u> </u>
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	<b>:</b> .	\$		0.00	\$		N/A	
	8d.	Unemployment compensation	8d	i.	\$		0.00	\$	-	N/A	_
	8e.	Social Security	8e	€.	\$		0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$	(	0.00	\$		N/A	<u>.</u>
	8g.	Pension or retirement income	8g		\$_		0.00	\$_		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$		0.00	+ \$_		N/A	<u>\</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	(	0.00	\$_		N/	A
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		3,230.00	+ \$		N/A	= \$	3,230.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		3,230.00	<b>Τ</b>   Ψ.		IN/A		3,230.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe					•		e <i>J.</i> +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain lies							. 12.	\$	3,230.00
13.	Do	you expect an increase or decrease within the year after you file this form	?							Combi month	ned ly income
		No.  Yes Explain:									

Official Form 106I Schedule I: Your Income page 2

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 40 of 68

Fill	in this informa	tion to identify yo	our case:					
	otor 1	Sheryl Walke				Check	c if this is:	
Doh	tor 2	onory: rraine	-				An amended filing	ving postpotition aboutor
	ouse, if filing)							ving postpetition chapter the following date:
Unit	ed States Bankr	ruptcy Court for the:	NORTH	HERN DISTRICT OF ILLIN	OIS	<u> </u>	MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J						
		J: Your I	 Exper	nses				12/15
Be	as complete a	and accurate as	possible eded, atta	. If two married people ar				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to	o line 2. e <b>s Debtor 2 live i</b>	n a separ	ate household?				
			t file Offic	ial Form 106J-2, <i>Expense</i> s	for Separate Housel	hold of Debto	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state dependents				Child		16	□ No ■ Yes
	·							□ No
					Child		25	■ Yes
								□ No □ Yes
								□ No
								☐ Yes
3.		oenses include f people other th	han 📕	No				
		d your depender		Yes				
Par	t 2: Estim	ate Your Ongoir	ng Month	ly Expenses				
Est exp	imate your ex	cpenses as of yo	our bankr	uptcy filing date unless y y is filed. If this is a supp				
				government assistance in				
	ficial Form 10						Your exp	enses
4.		or home ownersland any rent for the		nses for your residence. In or lot.	nclude first mortgage	4. \$		800.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	•	rty, homeowner's				4b. \$		0.00
				upkeep expenses		4c. \$		0.00
5.		owner's associati nortgage payme		aominium aues <b>our residence,</b> such as ho	me equity loans	4d. \$ 5. \$		0.00

# Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 41 of 68

Deb	tor 1	Sheryl W	/alker	Case	num	ber (if known)	
6.	Utiliti	ies:					
٥.	6a.		heat, natural gas		6a.	\$	350.00
	6b.	Water, sev	wer, garbage collection		6b.	\$	75.00
	6c.		e, cell phone, Internet, satellite, and cable serv	ices	6c.	\$	350.00
	6d.	Other. Spe	ecify:		6d.	\$	0.00
7.	Food		ekeeping supplies		7.	\$	650.00
8.			hildren's education costs		8.	\$	0.00
9.	Cloth	ning, laund	ry, and dry cleaning		9.	\$	150.00
10.	Perso	onal care p	roducts and services		10.	\$	175.00
11.	Medi	cal and de	ntal expenses		11.	\$	150.00
12.	Trans	sportation.	Include gas, maintenance, bus or train fare.				
			ar payments.		12.	\$	400.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines,	and books	13.	\$	100.00
14.	Char	itable cont	ributions and religious donations		14.	\$	0.00
15.	Insur						
			surance deducted from your pay or included i				
		Life insura			15a.	·	0.00
		Health ins			15b.		0.00
	15c.	Vehicle ins	surance		15c.	\$	0.00
			rance. Specify:		15d.	\$	0.00
16.			clude taxes deducted from your pay or include	ed in lines 4 or 20.			
	Spec	·			16.	\$	0.00
17.			ease payments:		47-	Φ.	
			ents for Vehicle 1		17a.	·	0.00
			ents for Vehicle 2		17b.	· -	0.00
		Other. Spe			17c.	·	0.00
		Other. Spe	•		17d.	\$	0.00
18.	Your	payments	of alimony, maintenance, and support that	you did not report as	18.	\$	0.00
10			your pay on line 5, <i>Schedule I, Your Income</i> s you make to support others who do not li		10.	Ψ	0.00
19.	Spec		s you make to support others who do not in	ve with you.	19.	Ψ	0.00
20	•	,	erty expenses not included in lines 4 or 5 o	f this form or on Schedule		our Income	
20.			s on other property		20a.		0.00
		Real estat			20b.	· ·	0.00
			nomeowner's, or renter's insurance		20c.	·	0.00
			ice, repair, and upkeep expenses		20d.		0.00
			er's association or condominium dues		20e.		0.00
21		r: Specify:	or a accordance of condemnant adde	•	21.		0.00
۷١.	Othe	a. Opecity.			۷١.	ΤΨ	0.00
22.	Calcu	ulate your i	monthly expenses				
	22a. /	Add lines 4	through 21.			\$	3,200.00
	22b.	Copy line 2:	2 (monthly expenses for Debtor 2), if any, fron	Official Form 106J-2		\$	
	22c. /	Add line 22a	a and 22b. The result is your monthly expense	es.		\$	3,200.00
23.		•	monthly net income.			•	
			12 (your combined monthly income) from Sch		23a.		3,230.00
	23b.	Copy your	monthly expenses from line 22c above.	2	23b.	-\$	3,200.00
	00-	Cb					
	23c.		our monthly expenses from your monthly inco is your monthly net income.	me.	23c.	\$	30.00
		THE TESUIT	is your monuny neumcome.	•	_00.		
24.	Do vo	ou expect a	an increase or decrease in your expenses v	vithin the year after you file	this	form?	
	For ex	xample, do yo	ou expect to finish paying for your car loan within the				ease or decrease because of a
	modifi	ication to the	terms of your mortgage?		-		
	■ No	0.					
	□Y€	es.	Explain here:				

### Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 42 of 68

Fill in this info	rmation to identify your	case:			
Debtor 1	Sheryl Walker				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For		n Individual	Debtor's Sc	hadulas	
Declara	tion About a	in individual	Deptor 5 30	nedules	12/15
You must file the obtaining mone years, or both.	is form whenever you fi	le bankruptcy schedules		Making a false statem	nent, concealing property, or , or imprisonment for up to 20
Did you p	ay or agree to pay some	one who is NOT an attor	rney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
that they a	re true and correct. eryl Walker	that I have read the sum	x	d with this declaration	,
,	rl Walker ure of Debtor 1		Signature of	Deptor 2	

Date \_\_\_\_\_

Date December 30, 2016

# Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 43 of 68

Fill	in this informati	on to identify you	r case:			
Del		Sheryl Walker				
Del	F btor 2	First Name	Middle Name	Last Name		
		First Name	Middle Name	Last Name		
Uni	ited States Bankru	ptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
	se number nown)					heck if this is an
					a	mended filing
~	· · · · · · ·	407				
	ficial Form	-	Affaina fan Indiini	luala Filima fan F	) =	
			Affairs for Individ			4/10
info	rmation. If more		attach a separate sheet to		equally responsible for sup y additional pages, write you	
Par	rt 1: Give Deta	ils About Your Ma	rital Status and Where You	Lived Before		
1.	What is your cu	rrent marital statu	ıs?			
	☐ Married					
	■ Not married					
2.	During the last	2 voars have vou	lived anywhere other than	whore you live new?		
۷.	During the last	o years, nave you	iived allywhere other than	where you live now :		
	■ No					
	☐ Yes. List all	of the places you l	ived in the last 3 years. Do no	ot include where you live nov	V.	
	Debtor 1 Prior	Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
_	Marie de la co					
<b>3.</b> state					nity property state or territory lico, Texas, Washington and W	
	■ No					
	_	sure you fill out Sch	nedule H: Your Codebtors (Of	ficial Form 106H).		
Do	t 2 Evaloin th	a Sauraga of Vau	r Incomo			
Pai	Explain th	ne Sources of You	r income			
4.					ear or the two previous caler	ndar years?
			u received from all jobs and a have income that you receive			
	□ No					
	Yes. Fill in t	he details.				
			Dahtar 4		Dahtan 0	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		current year until	☐ Wages, commissions,	\$35,625.00	☐ Wages, commissions,	
tne	date you filed fo	or bankruptcy:	bonuses, tips		bonuses, tips	
			☐ Operating a business		☐ Operating a business	
	r last calendar ye		☐ Wages, commissions,	\$39,000.00	☐ Wages, commissions,	
(Ja	nuary 1 to Decer	nber 31, 2015)	bonuses, tips	,	bonuses, tips	
			☐ Operating a business		☐ Operating a business	
Offic	ial Form 107		Statement of Financial Aff	airs for Individuals Filing for E	Bankruptcy	page

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main

Document Page 44 of 68 Debtor 1 Sheryl Walker Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$27,000.00 ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No П Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income **Gross income from** Sources of income Gross income Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?  $\square$  No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for

No

Yes. List all payments to an insider.

**Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 45 of 68 **Sheryl Walker** Case number (if known) Debtor 1 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number City of Chicago V Walker Administrative □ Pending Judgment for □ On appeal Water Bill □ Concluded

10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?
	Check all that apply and fill in the details below.

l Nia	Go to	lina	11

Yes. Fill in the information below.

Creditor Name and Address	Describe the Property	Date	Value of the
			property
	Explain what happened		

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Nο

Yes. Fill in the details.

**Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes

#### **List Certain Gifts and Contributions**

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address.

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 46 of 68 Case number (if known)

14.	Within 2 years before you filed for bankr  ■ No □ Yes. Fill in the details for each gift or o		lid you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that it more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed	Dates you contributed	Value
Par	6: List Certain Losses				
_	Within 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending ace claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	17: List Certain Payments or Transfers	s			
	consulted about seeking bankruptcy or	preparir	d you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require	,, ,	ty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Gleason & Gleason LLC 77 W. Washington, Ste 1218 Chicago, IL 60602 http://chilawyers.com		\$90.00 attorney fees plus \$335.00 court filing fee.	2016	\$425.00
	myHorizon 4540 Honeywell Ct Dayton, OH 45424 http://myhorizontoday.com		Credit Counseling	2016	\$20.00
	promised to help you deal with your creed not include any payment or transfer that  No	ditors o		or transfer any proper	ty to anyone who
	Yes. Fill in the details.		Description of the last	D-1	
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 47 of 68

Sheryl Walker Case number (if known) Debtor 1 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Date Transfer was Description and value of the property transferred made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. п No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Last balance Type of account or Date account was account number closed, sold, instrument before closing or Address (Number, Street, City, State and ZIP Code) moved, or transfer transferred **TCF National Bank** XXXX-☐ Checking **Negative** \$0.00 Attn: Bankruptcy □ Savings 800 Burr Ridge ☐ Money Market Willowbrook, IL 60527 ☐ Brokerage □ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Nο Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code)

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

■ No

Yes. Fill in the details.

Name of Storage Facility
Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it? Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Page 48 of 68
Case number (if known) Document

Debtor 1 Sheryl Walker

Pai	t 9: Identify Property You Hold or Control for S	omeone Else						
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any propo	erty y	ou borrowed from, are storing for	, or hold in trust			
	No							
	☐ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value			
Pai	t 10: Give Details About Environmental Informat	tion						
For	the purpose of Part 10, the following definitions a	pply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as d to own, operate, or utilize it, including disposal s		ıl law,	whether you now own, operate, o	or utilize it or used			
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si		us wa	ste, hazardous substance, toxic s	ubstance,			
Rep	ort all notices, releases, and proceedings that you	ı know about, regardless of who	en the	ey occurred.				
24.	Has any governmental unit notified you that you	may be liable or potentially liab	le un	der or in violation of an environme	ental law?			
	<b>=</b>							
	■ No □ Yes. Fill in the details.							
	Name of site	Governmental unit		Environmental law, if you	Date of notice			
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State a ZIP Code)	and	know it				
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administ	rative proceeding under any en	viron	mental law? Include settlements a	and orders.			
	■ No							
	Yes. Fill in the details.							
	Case Title	Court or agency	Na	ture of the case	Status of the			
	Case Number	Name Address (Number, Street, City, State and ZIP Code)			case			
Pai	t 11: Give Details About Your Business or Conn	ections to Any Business						
27.	Within 4 years before you filed for bankruptcy, di	id you own a business or have a	any of	the following connections to any	business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
☐ An owner of at least 5% of the voting or equity securities of a corporation								

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Document Page 49 of 68 Debtor 1 Sheryl Walker Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sheryl Walker Signature of Debtor 2 **Sheryl Walker** Signature of Debtor 1 Date December 30, 2016 Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

### Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 50 of 68

Debtor 1	Sheryl Walker				
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number				☐ Check if this is	s an
				amended filing	
Official Fo	orm 108				
Official Fo		on for Individu	ıals Filing Under	amended filing	
		on for Individu	ıals Filing Under	amended filing	g
Stateme	nt of Intentio	on for Individu		amended filing	g

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

on the form

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
		□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

# Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 51 of 68

Debtor 1 Sheryl Walker	Case number (if known)	
name:  Description of property securing debt:	<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	□Yes
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed ir in the information below. Do not list real estate leases. Une You may assume an unexpired personal property lease if the	xpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(2)	lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes

# Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 52 of 68

Debtor	1 <u>S</u>	Sheryl Walker	Case number (if known)
Part 3:	Sic	gn Below	
		ry of perjury, I declare that I have indicat it is subject to an unexpired lease.	ed my intention about any property of my estate that secures a debt and any personal
X /s	s/ She	eryl Walker	X
She		Walker	Signature of Debtor 2
	ignatu	re of Debtor 1	
D	ate	December 30, 2016	Date

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7:	Liquidation
,	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
;	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
·	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 57 of 68

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court**Northern District of Illinois

In 1	re Sheryl Walker Case No.
	Debtor(s) Chapter <b>7</b>
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 940.00
	Prior to the filing of this statement I have received \$ 90.00
	Balance Due \$ <b>850.00</b>
2.	\$335.00_ of the filing fee has been paid.
3.	The source of the compensation paid to me was:
	■ Debtor □ Other (specify):
4.	The source of compensation to be paid to me is:
	■ Debtor □ Other (specify):
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> </ul>
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following service:  a. Representation of the debtors in any dischargeability actions, judicial lien avoidances, or any other adversary proceeding.
	b. Debtor is responsible for the 2 mandatory credit counseling classes.
	c. This fee agreement does not include representation in motions to redeem.

Case 16-40835 Doc 1 Filed 12/30/16 Entered 12/30/16 15:51:49 Desc Main Document Page 58 of 68

In re	Sheryl Walker	Case No.	
	Debtor(s)		

#### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION
I certify that the foregoing is a complete sta his bankruptcy proceeding.	tement of any agreement or arrangement for payment to me for representation of the debtor(s) is
December 30, 2016	/s/ Julie Gleason
Date	Julie Gleason 6273536
	Signature of Attorney
	Gleason & Gleason
	77 W Washington, Ste 1218
	Chicago, IL 60602
	(312) 578-9530 Fax: (312) 578-9524
	troy@chicagobk.com ′
	Name of law firm



### Gleason & Gleason

Chapter 7 Information and Advice

Attorney fees \$940 + Court costs \$335 | \$1275 total costs
Payment Plan: 3 payments of \$425. If all fees are not paid prior to the filing of your case, you will be asked to sign a post-petition fee agreement for services rendered after the filing of your case.

Fees Cover: Intake appointment with attorney, petition preparation, representation at your first meeting of creditors, answering creditor calls and requests.

FEES DO NOT COVER: Credit counseling - there are 2 MANDATORY CLASSES. Additional litigation for adversaries, redemptions, defense of motions brought on behalf of a creditor or a trustee, or conversion of a chapter 7 to a chapter 13. You will be charged \$30 to add any creditors after the case is filed. You will be charged \$100 for us to attend a second meeting of creditors if you miss your first meeting. If your case is closed for failure to take the second class, the court will require you to pay \$260 to reopen the case. Initial here: I understand it is the policy of Gleason and Gleason that I am required to take my second class between case filing and my first 341 meeting of creditors. I understand that if my case closes without discharge and my certificate is dated after the first 341 meeting of creditors it is my responsibility to pay \$260 to reopen-it.

Typical dischargeable debts: credit cards, medical bills, utilities, unsecured judgments, repossessions, personal loans, payday

Non dischargeable debts: Alimony, child support, debts owed under a divorce decree, student loans, traffic tickets, parking tickets, fines, criminal restitution, debt for personal injury or death related to a DUI, overpayment of government benefits, taxes. Co-signors are still responsible for debts. Credit card charges over \$500 in the last 90 days and cash advances over \$750 in the last 70 days may not be discharged.

Secured Loans Surrendering: (House|Car|Furnithre|Jewelry) If you are surrendering a car or a house you are still responsible for tickets, code violations, HOA Fees etc until ownership\title is transferred - usually through a sale, like an auction of the car or house. Title is not transferred through the bankruptcy process. You will be responsible for utilities if not disconnected. Loans brough municipal credit unions may be secured by pensions. Credit union loans may be cross collateralized with other credit union

I understand I must continue to make regular payments on all secured Secured Loans Keeping: Initial here: loans I am keeping. I may have to mail in payments as auto debit and check by phone may be disabled until a debt is reaffirmed. I ynderstand I am required to maintain insurance. I understand that if I am keeping a property I must pay all mortgages including but not limited to 2nd mortgages and home equity lines of credit.

Payday Loans | Autodebits | Post dated checks: You must stop them with your bank. It may require closing the bank account. Utilities If you bankrupt your utilities they are allowed to charge a deposit for future service and you must pay for any service used after your filing date forward. If you bankrupt a phone or cellular service they may discontinue service.

.Credit reporting: We pull credit reports from Transunion and Experian, We cannot guarantee the accuracy or completeness of the reports. Some creditors do not report to credit bureaus. It is your responsibility to review the report and inform us of any missing

Gleason and Gleason does not perform and this contract does not include any services relating to credit repair or correcting inaccurate credit reports. Credit bureaus may or may not report information regarding payments on cars or real estate you are keeping.

Clients agree that they have received the following documents: copy of this retainer agreement, list of required items to file bankruptcy, debtor's duties as required under sec. 521, notice required by sec 527(a)(2), notice required by sec 527(b). Checks may be deposited electronically. Client agrees to pay reasonable attorney fees if collections become necessary.

Refund Policy: If Client wants to terminate Gleason and Gleason, Client must notify Gleason and Gleason in writing. Gleason and Gleason will then perform an accounting of time and services performed and issue a refund check (if applicable) within a reasonable time for the purpose of determining the refund due, Gleason and Gleason's current hourly rate is \$300 an hour for attorney time.

Client / Mullwalke Atto	rney // M	told m
	70 1	
Joint Client:	//	



# First Bankruptcy Course

### Choose how to take your pre-filing course



Take the course online

Step 1: Go to myhorizontoday.com/firstcourse

Step 2: Enter your Access Code: 041264(

Step 3: Complete your registration by following the on-



Take the course by phone

Step 1: Call 1.877.213.6519

Step 2: Enter your Access Code: 0412640

Step 3: Complete your registration by following the telephonic instructions

### Available course providers

Pre-filing Course Provider	Course Price	<b>Course</b> Availability	Counselor Online	Counselor Phone
Debt Education and Certification Foundation	\$24	24/7	24/7	24/7
Cricket Credit Counseling	\$24	24/7	M-F: 9am - 9pm EST	M-F: 9am - 9pm EST
DebtHelper	\$24	24/7	M-Th: 9am - 9pm F: 9am - 7pm Sat: 10am - 5pm EST	M-Th: 9am - 9pm F: 9am - 7pm Sat: 10am - 5pm EST
Urgent Credit Counseling	\$20	24/7	M-F: 9am - 9pm EST	M-F: 9am - 9pm EST

All online and telephonic courses are available in English and Spanish.

Questions? Contact myHorizon support Meli & . 8pm

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customercare comphorizontoday.com

All Providers listed above are approved to issue carcination by identification of the Education in Spirit land with the Bankruptcy Code. Approval does not endorse or assure the quakty of the Bankruptcy Code. Approval does



# Second Bankruptcy Course

### Choose how to take your post-filing course



Take the course online

Step 1: Go to myhorizontoday.com/secondcourse

Step 2: Enter your Access Code: 041264(

Step 3: Complete your registration by following the onscreen instructions



Take the course by phone

Step 1: Call 1.877.213.6519

Step 2: Enter your Access Code: 0412640

Step 3: Complete your registration by following the telephonic instructions

### Available course providers

Post-filing Course Provider	Course Price	<b>Course</b> Availability	Counselor Online	Counselor Phone
Debt Education and Certification Foundation	324	24/7	24/7	24/7
Second Bankruptcy Course	\$15	24/7	M-F 8am-8pm ET*	M-F 8am-8pm ET*

All online and telephonic courses are available in English and Spanish.

**QUESTIONS?** Contraction Horizon Support M-F.8 - Spin E.T. Toll-free: 888.410.6985. Email: customercare@myhorizontoday.com.

All Providers listed above are approved to issue cartificates evidencing completion of debtor education in compliance with the Bankruptcy Code. Agree oval does not endarse or assure the quality of the Provider's pervices. To see a full list of US Trustee approved providers visit the US Trustee office website: 135.

WWW. Usafers 2000 Structured to completion of a full care in the providers with the US Trustee of the Website: 135.

<sup>\*</sup>A live SBC Counselor session is only required if the automated quiz is failed twice.



#### **Chapter 7 Bankruptcy Retainer Agreement**

THE UNDERSIGNED CLIENT(S) EMPLOYS AND RETAINS GLEASON AND GLEASON, HEREINAFTER, ATTORNEY TO REPRESENT CLIENT(S) IN FILING A VOLUNTARY CHAPTER 7 BANKRUPTCY PETITION

THE PRE-PETITION SERVICES ATTORNEY WILL PROVIDE ARE CONSULTATION AND ADVICE, CONTACT AND COMMUNICATION WITH CREDITORS, PREPARATION OF THE BANKRUPTCY PETITION, SCHEDULES, STATEMENT OF FINANCIAL AFFAIRS, STATEMENT OF SOCIAL SECURITY NUMBER, MEANS TEST. CLIENT UNDERSTANDS THAT HE/SHE/THEY ARE SOLEY RESPONSIBLE FOR COMPLETING PRE-FILING CREDIT COUNSELING AND MUST OBTAIN A CERTIFICATE WHICH MUST BE FILED WITH THE COURT AT THE TIME OF FILING HIS/HER/THEIR PETITION. CLIENT IS RESPONSIBLE FOR ALL COSTS ASSOCIATED WITH SAID COUNSELING.

THE EARLIED FEE FOR THE PREPARITION SERVICE IS \$
FILING FEE OF \$ 335.00
TOTAL OF PREPETITION SERVICE AND FILING FEE (PAYABLE TO GLEASON AND GLEASON): \$ $425$
RETAINED WITH (CASH   CHECK   DEBIT   MONEY ORDER) \$
BALANCE DUE FOR PRE-PETITION ATTORNEY FEES AND FILING FEE \$
AFTER THE BANKRUPTCY CASE IS FILED I UNDERSTAND THAT I WILL BE PRESENTED WITH A SECOND RETAINER AGREEMENT TO PAY GLEASON AND GLEASON ATTORNEY FEES OF \$FOR POST FILING LEGAL SERVICES AND HAVE BEEN GIVEN A COPY OF THE PROPOSED AGREEMENT.
CLIENT UNDERSTANDS THAT ONCE THE BANKRUPTCY CASE IS FILED THEY WILL NOT BE LEGALLY OBLIGATED FOR ANY OTHER FEES UNLESS AND UNTIL THEY ENTER INTO A SECOND RETAINER AGREEMENT PROMISING TO PAY FEES FOR THE REMAINDER OF MY REPRESENTION IN THIS CASE. CLIENT UNDERSTANDS THAT THEY ARE NOT OBLIGATED TO ENTER INTO AND MAY REFUSE TO SIGN THE SECOND RETAINER AGREEMENT. HOWEVER, GLEASON AND GLEASON RESERVES HE RIGHT TO WITHDRAW FROM REPRESENTATION IN THE EVENT THAT I DO NOT SIGN A SECOND RETAINER WITHIN 10 DAYS OF THE FILING OF MY CASE. CLIENT MAY SEEK OTHER LEGAL COUNSEL IF THEY DO NOT WISH TO BE REPRESENTED BY GLEASON AND GLEASON.
I UNDERSTAND THAT FEES PAID OR TO BE PAID ARE A FLAT FEE WHICH SHALL IMMEDIATELY BECOME PROPERTY OF GLEASON AND GLEASON IN AN EXCHANGE FOR A COMMITMENT BY GLEASON AND GLEASON TO PROVIDE LEGAL SERVICES. FUNDS WILL BE DEPOSITED INTO THE MAIN BANK ACCOUNT AND USED FOR GENERAL EXPENSES OF GLEASON AND GLEASON.
LOCAL RULE 2091-1 (B) DISCLOSURE WITHDRAWAL DDITION, AND SUBSTITUTION OF COUNSEL
FAILURE TO PAY - IN A CASE UNDER CHAPTER 7 OF THE BANKRUPTCY CODE, INCLUDING A CASE CONVERTED FROM CHAPTER 13, WHERE (1) THE DEBTOR'S ATTORNEY HAS AGREED TO REPRESENT THE DEBTOR CONDITIONED ON THE DEBTOR ENTERING INTO AN AGREEMENT AFTER THE FILING OF THE CASE TO PAY THE ATTORNEY FOR SERVICES RENDERED AFTER THE FILING OF THE CASE AND (2) THE DEBTOR REFUSES TO ENTER INTO SUCH AN AGREEMENT, THE COURT MAY ALLOW THE ATTORNEY TO WITHORAW FROM REPRESENTATION OF THE DEBTOR ON MOTION OF THE ATTORNEY.
DATE CLIENT Shurf Walker ATTORNEY
JOINT CLIENT

77 W WASHINGTON, STE 1218 CHICAGO, IL 60602 | (312) 445-8825 | CHILAWYERS.COM | OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.

Advocate Medical Group PO box 92523 Chicago, IL 60675

Advocate Trinity Hospital PO Box 4253 Carol Stream, IL 60197

Afni 1310 Martin Luther King Dr. Bloomington, IL 61702

Arnold Scott Harris 111 W. Jackson Ste 400 Chicago, IL 60604

Big Picture Loans PO Box 704 Watersmeet, MI 49969

Brookwood Loans of IL PO Box 5970 Alpharetta, GA 30023

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Cci Contract Callers Inc. Cci Augusta, GA 30901

ChexSystems
7805 Hudson Rd, Ste 100
Saint Paul, MN 55125

Citifinancial

City of Chicago Attn: Mayor Rahm Emanuel 121 N LaSalle, #507 Chicago, IL 60602 City of Chicago - Utility Billing PO Box 6330 Chicago, IL 60680

City of Chicago Dept of Law Attn: Charles King 121 North LaSalle Street, Suite 600 Chicago, IL 60602

Comenity Bank/vctrssec Po Box 182789 Columbus, OH 43218

Convergent Outsourcing, Inc. 800 SW 39th St. PO Box 9004 Renton, WA 98057

Cook County Treasurer 118 N. Clark. St. Suite 112 Chicago, IL 60602

Credit Management Lp 4200 International Pkwy Carrollton, TX 75007

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

Creditors Discount & Audit Co. 415 E Main St Streator, IL 61364

DashOfCash PO box 1469 Khanawake QB

DirecTV
Payment Center
PO Box 78626
Phoenix, AZ 85062

Emergency Room Care PO Box 87618 Chicago, IL 60680

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256

Eos Cca Po Box 981008 Boston, MA 02298

First National Collection Bureau 610 Waltham Way Sparks, NV 89434

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

Galaxy 1000 N West St, Ste 1224 Wilmington, DE 19801

Genesis Bc/celtic Bank 268 S State St Ste 300 Salt Lake City, UT 84111

Green Pine sokaogon Finance 3051 Sand Lake Rd Crandon, WI 54520

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Illinois Dept of Employment Securit Bankruptcy Unit Collection Subdivis 33 S State St 10th Floor Chicago, IL 60603 Illinois Lending Bankruptcy Dept 724 W Washington Chicago, IL 60661

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

LNVN Funding Resurgence Capital Services PO Box 10587 Hickory, NC 28603

MiraMed Revenue Group LLC Dept 77304 PO Box 77000 Detroit, MI 48277-0304

North Star Finance LLC PO Box 498 Hays, MT 59527

Northwestern Medical Group 26609 Network Place Chicago, IL 60673

Northwestern Medicine 28155 Network Pl Chicago, IL 60673

Northwestern Memorial Hospital 201 E Huron St #105 Chicago, IL 60611

Onemain Po Box 1010 Evansville, IN 47706

Portfolio Recovery 130 Corporate Boulevard Norfolk, VA 23502

Springleaf Financial S 3641 E 106th St Chicago, IL 60617

State Collection Service 2509 S Stoughton Rd Madison, WI 53716

Syncb/amazon Po Box 965015 Orlando, FL 32896

Syncb/walmart Po Box 965024 Orlando, FL 32896

TCF National Bank Attn: Bankruptcy 800 Burr Ridge Willowbrook, IL 60527

Trinity Hospital 2320 East 93rd Street Chicago, IL 60617

Us Dept Of Ed/glelsi Po Box 7860 Madison, WI 53707

Weltman Weinberg & Reis 180 N LaSalle St, Ste 2400 Chicago, IL 60601

## **United States Bankruptcy Court**Northern District of Illinois

In re	Sheryl Walker		Case No.		
	-	Debtor(s)	Chapter 7		
	VI	ERIFICATION OF CREDITOR M	<b>IATRIX</b>		
		Number of	Number of Creditors:		
	The above-named Debtor(s (our) knowledge.	) hereby verifies that the list of credi	itors is true and corre	ect to the best of my	